

AC. 4412 (1) CHATHAM



Borough of Chatham

Annual Report

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1917

CHATHAM :

CLEMENTS BROS., Meeting House Lane

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Borough of Chatham

TO THE MAYOR AND CORPORATION.

GENTLEMEN,

In presenting my Report on the sanitary condition of the Borough during the year 1917, it is necessary to observe that in accordance with the suggestion of the Local Government Board, and in the interests of economy, it is again of an interim character, and that many details usually included in Annual Reports have been omitted. Essential and urgent matters receive attention, with a view to focussing public interest on subjects which are now taking a prominent place in health administration, and which I venture to think only foreshadow more drastic changes and reforms in connection with the prevention and treatment of disease.

Measles has been prevalent, but not very fatal.

Cerebro Spinal Fever of a sporadic character caused fewer cases than in 1916.

All other infectious diseases have been few in number, and on the whole, considering the difficulties of securing adequate public sanitation, the general health of the Borough has been satisfactory.

The newly opened Maternity Centre is proving a useful auxiliary in Infant Welfare work, and is greatly appreciated.

Cordial relations have existed between the Naval, Military and Civil Authorities, and much mutual assistance has been rendered during the year. I am indebted to Mr. Collard, Inspector of the Society for the Prevention of Cruelty to Children, who has brought to my notice several cases where I have been able to secure improved conditions; and to Mr. Coles Finch, for statistics of local rainfall.

I also thank the Council for the courteous consideration accorded to such recommendations as it has been my privilege to put before them.

I am, Gentlemen,

Your obedient servant,

J. HOLROYDE, F.R.C.S., D.P.H.,
Medical Officer of Health.

Chatham.

April 6th, 1918.

SUMMARY OF VITAL STATISTICS.

Area in Acres (inclusive of water) ...	4,443.298
,, ,, (inland water only) ...	4,356
Population (Census, 1911)	42,250
Population (Civilians only) estimated by Registrar General	
For Birth Rate	40,600
For Death Rate	36,422
Births registered.....	916
Birth Rate per 1,000	22.5
Nett Deaths registered	567
Death Rate per 1,000	15.5
Zymotic Death Rate	1.0
Mortality from all forms of Tubercu- losis, including Phthisis.....	1.5
Phthisis Death Rate	1.3
Infantile Mortality per 1,000 Births ..	100
Number of occupied houses	9,604
Total Rates in the £	8s. 9d.
A 1d. Rate produces	£670

OFFICIAL CIRCULARS ISSUED DURING 1917 BY THE LOCAL GOVERNMENT BOARD.

Circular and Amending Order	
Milk and Cream Regulations	February 8, 1917
Public Health (Small Pox Prevention) Regulations	
Circular and Order	February 13, 1917
Reception of Mental Defectives in Poor Law Institutions	
Regulations	June 13, 1917
Houses of the Working Classes Circular	July 28, 1917
Indigenous Malaria Circular	August 28, 1917

SPECIAL REPORTS TO COUNCIL.

- Venereal Diseases.
- Registered Common Lodging Houses.
- Maternal and Child Welfare.
- Anthrax.

1.—VITAL STATISTICS.

POPULATION.

For the calculation of Birth and Death Rates, two estimates of the population are sent by the Registrar General. This method was used for the first time in 1916, and instead of showing an annual increase, the numbers now given are actually below the Census figures of 1901. The method may give a more correct estimate of Mortality, but to any one acquainted with the district it is hardly credible that the population has decreased each year.

In 1911—when the last Census was taken—the population was 42,250, and the number of inhabited houses 9,562.

At the present time the lower estimate of population is 36,422 for the Death Rate, and the number of inhabited houses is 9,604.

A recent inquiry during the registration of occupiers for food distribution, showed over 400 houses containing eight or more occupiers.

My opinion is that the Registrar General's figures very much understate the population, and therefore overstate the mortality. The actual population is unknown. It will be noted that the higher estimate for Births, 40,600, is arrived at by adding to the civilian population an average proportion of soldiers. 4,178 may be the average number of soldiers found throughout the country in populations of 36,422, but in a military centre like Chatham it is obviously incorrect.

The two populations for 1917 issued by the Registrar General are

For the Birth Rate	40,600
For the Death Rate	36,422

BIRTHS.

The number of Births registered as belonging to Chatham during 1917 was 916. Males, 293; Females, 274.

Birth Rate, 22.5 per 1,000	
Legitimate Births.....	868
Illegitimate Births	48

The number of Still Births was 44.

The following Table shows the natural increase of population—that is, the increase of Births over Deaths in each division of the Borough. The figures deal only with Births and Deaths actually registered within the Borough, and do not include transfers.

St. Mary's Ward....	169	99	70
Luton , , ,	451	193	258
St. John's , , ,	291	121	170
	—	—	—
	911	413	498
Deaths in Institutions		105	105
		—	—
		518	393

The net result is an increase of 393.

DEATHS.

The total number of deaths registered (Civilians) was 567.

The Death Rate per 1000 is 15.5.

The following Table, supplied by the Registrar General, shows the causes of death, etc., for each sex.

	Causes of Death in Chatham, M.B., 1917. (Civilians)	Males.	Females.
	All causes	293	274
1.	Enteric Fever		
2.	Small-pox.....		
3.	Measles	3	5
4.	Scarlet Fever		
5.	Whooping Cough	3	6
6.	Diphtheria and Croup		2
7.	Influenza	1	1
8.	Erysipelas		1
9.	Pulmonary Tuberculosis	29	21
10.	Tuberculous Meningitis	2	2
11.	Other Tuberculous Diseases.....	2	1
12.	Cancer, Malignant Disease	16	26
13.	Rheumatic Fever	3	
14.	Meningitis	11	4
15.	Organic Heart Disease	26	26
16.	Bronchitis	28	21
17.	Pneumonia (all forms)	20	18
18.	Other Respiratory Diseases	1	5
19.	Diarrhoea, etc. (under 2 years) ...	9	10
20.	Appendicitis and Typhlitis	2	5
21.	Cirrhosis of Liver	1	3
21A.	Alcoholism		
22.	Nephritis and Brights Disease	8	10
23.	Puerperal Fever		
24.	Parturition apart from Puerperal Fever		2

	Causes of Death in Chatham, M.B., 1917. (Civilians)	Males.	Females.
25.	Congenital Debility, etc.	14	15
26.	Violence, apart from Suicide	12	6
27.	Suicide	4	2
28.	Other Defined Diseases	96	76
29.	Causes Ill-defined or Unknown....	2	6
	Special Causes (included above)		
	Cerebro-Spinal Fever	7	4
	Poliomyelitis		
	Deaths of Infants under 1 year of age	46	46
	Total Births.....	474	442
	Legitimate	454	414
	Illegitimate	20	28
	POPULATION { For Birth Rate,	40,600.	
	{ For Death Rate;		36,422.

GENERAL REGISTER OFFICE,
SOMERSET HOUSE,
LONDON, W.C. 2.

April, 1918.

For comparative purposes the following figures relating to England and Wales are submitted.

England and Wales	14.4	97
96 Great Towns, including London	14.6	104
148 Smaller Towns.....	13.2	93
Chatham	15.5	100

The average Birth Rate for England and Wales is 17.8.

The figures are provisional, being based on last year's estimates of population.

AGES.

Deaths occurred as follows :—

Under 1 year.....	88
1 and under 5 years..	49
5 ,, ,, 15 ,, ..	12
15 ,, ,, 25 ,, ..	18
25 ,, ,, 65 ,, ..	177
65 years and upwards..	178

15 per cent. were under 1 year.

15 ,, ,, between 1 and 25 years.

70 ,, ,, over 25 years.

The number of uncertified deaths was 26.

 ,, illegitimate ,, ,, 21.

INFANTILE MORTALITY.

Total deaths under 1 year	92
Rate per 1,000 nett births	100
The averages for three quinquennial periods from 1901 are	
1901-1905	150
1906-1910	117
1911-1915	115
1916	83

Of the total deaths,

39 or 43 per cent. occurred during the first 4 weeks
 17 or 19 per cent. between the 1st and 3rd month
 8 or 8 per cent. between the 3rd and 6th month
 28 or 30 per cent. between the 6th and 12th month

The following Table shows the number of deaths under a year of age from Debility and Premature Birth during the past seven years.

1911	53
1912	53
1913	58
1914	39
1915	43
1916	39
1917	36

RESPIRATORY DISEASES.

These were very prevalent during the first quarter of the year. The number was 93, as against 78 during 1916.

ORGANIC HEART DISEASE.

There were 52 deaths, as against 75 in 1916.

CANCER.

From Cancer and other forms of Malignant Disease there were 42 deaths.

2.—SANITARY ADMINISTRATION.

The Sanitary and Health Committee, composed of the whole Council, meets once a month.

During the past year the Inspector of Nuisances, with the approval of the Medical Officer of Health, has been empowered to issue notices under the Nuisance Sections of the Public Health

Acts, without waiting for report and confirmation, thus saving much valuable time, and securing more prompt removal of dangers to health.

The present Staff in addition to myself, consists of 1 Inspector of Nuisances, 1 Assistant Inspector, both fully qualified, 2 Health Visitors and 1 Clerk.

Mr. W. Hughes was appointed Chief Inspector in March, and has fully justified his selection. The efficiency of the Department has materially improved. In April, Mr. L. Croucher was appointed Assistant Inspector, and has recently obtained the Certificate of the Royal Sanitary Institute. He is proving a very useful and valuable official.

The work of the Department, although deprived of the services of one Inspector, has proceeded smoothly and efficiently, but for various reasons cannot be performed in every détail.

SALE OF FOOD AND DRUGS ACTS, 1875 TO 1907,

The administration of these Acts is under the County Police, and the following is a brief statement of work carried out.

162 samples were submitted for analysis, as follows :—

Milk	70 samples	(8 adulterated, see below)
------------	------------	-------------------------------

Butter	24	,
Margarine	20	,
Lard	10	,
Cocoa	4	,
Sago	1	,
Tapioca	1	,
Coffee	1	,
Jams.....	5	,
Tea	1	,
Cornflour	1	,
Arrowroot	1	,
Gd. Ginger.....	1	,
Baking Powder	1	,
Cream.....	1	,
Mustard	2	,
Whisky	6	,
Brandy.....	2	,
Gin	2	,
Olive Oil	1	,
Tincture Quinine	1	,

Cod Liver Oil	1	,
Ground Rice	1	,
Cheese	1	,
Corned Beef	1	,
Pepper	1	,
Flour	1	,

RESULT OF MILK PROCEEDINGS.

No. 1.	13% water	Fined £20
„ 2.	4.9 % „	Fined £2
„ 3.	7.5% „	Fined £2 10s.
„ 4.	52% „	Fined £30
„ 5.	28% „	Fined £20
„ 6.	Slight	Cautioned
„ 7.	„	,

MILK AND CREAM REGULATIONS, 1912.

No cases reported.

FOOD SUPPLIES AND INSPECTION.

This work includes the inspection of meat in slaughter houses and in shops, also inspection of premises in which foods of various kinds are prepared and stored. Such foods as brawn, sausages, meat pies, potted meats and fish, on account of their liability to contamination, especially if kept or prepared amongst dirty and insanitary surroundings, have had special attention.

Many visits have been paid to kitchens of restaurants and eating houses.

The object is to secure a proper standard of cleanliness—often difficult in dark and cramped surroundings, and the practice is of use in this respect, but needs to be constantly repeated. Several improvements have been effected by this system.

Several firms have entered into contracts for the supply of foods to soldiers, and these are all kept under special observation.

SLAUGHTERING OF ANIMALS.

There are 13 private Slaughter-houses on the Register. They are under constant supervision, but the majority of them are now restricted in use.

There is a tendency to arrange the killing for a number of butchers at one slaughter-house, and in one instance overcrowding of lairs resulted, which has been stopped.

ARMY ABATTOIR.

In June last a communication was received from the Local Government Board, respecting the co-operation of the Local Authority in making provision for the slaughter and inspection of cattle for the feeding of troops, and stating that the army slaughter-house at Southill Barracks would be utilised for the purpose, after certain alterations and additional fittings had been provided.

The buildings consist of Lairage, Killing Room, and Stores.

Plans for the alterations and additions were approved, and the whole of the work was carried out under the supervision of the Borough Surveyor. The additions consisted of additional lairage, a condemned meat and offal room, provision for hanging men's garments, and additional drinking troughs. The effect of the work was to provide well equipped premises for the purpose, viz., the slaughter of about 60 cattle daily, hanging for 90 carcases, and lairage for 120 animals.

The checking and slaughtering of cattle, the dispatch of meat, and the cleansing of the premises was carried out on behalf of the Army Authorities by the Agents of the War Office, whose manager acted as Military Representative, and was in charge of the staff.

The Council's Meat Inspector was appointed to inspect all carcases, and the Council also undertook the arrangements for the collection and disposal of manure, blood, third stomachs, and the usual slaughter-house refuse.

All meat after inspection was, if sound, stamped by the Inspector. He was also instructed to see that the whole of the premises were kept in a clean and sanitary condition, and to act under the general direction of the Medical Officer of Health, whose decision in any case was final.

Slaughtering began on September 30th and ended on December 11th.

The number of animals slaughtered was 2,119.

Number showing signs of Tuberculosis, 65.

Unsound meat condemned :—

Forequarters	2
Heads	24
Tongues	7
Lungs	50
Hearts	2

Livers	122
Stomachs	2
Spleens	4

The most common affections of the condemned organs were of a Parasitic or Tubercular character.

MILK SUPPLY.

Particulars of Cow Sheds and Milk Shops will be found in the statement of the Inspector of Nuisances.

Of the 33 registered Milk Shops, only 13 are now selling milk, others being closed owing to the shortage of supplies.

There are 209 cows in the sheds.

126 visits of inspection were made.

Two Statutory Notices were served, and several minor contraventions of regulations were amended without notices.

The Veterinary Inspector visits and reports quarterly on the health and condition of the animals, especially in regard to signs of Tuberculosis, or to disease of the udder or teats.

A large quantity of milk comes into the District by rail, the bulk of this supply being from the West of England.

Milk is a food of the highest importance. For infants and children it is indispensable. Complaints, not numerous, have been made of difficulty in obtaining it from vendors, and whenever I have been satisfied that such complaints are genuine, I have given Certificates, enabling mothers to obtain milk.

There are many undesirable factors in connection with the production, handling, distribution and storage of milk. The problem will probably be solved in the future by more effective control at the source, and by the establishment in districts of receiving and distributing depots, fitted with up-to-date appliances and methods for filtering, pasteurising and bottling. If milk could be protected from dirt and bacteria between the cow and the consumer, pasteurisation would be unnecessary. It is merely an attempt to destroy organisms which should never be allowed in the milk.

A meeting of representatives of the three Local Authorities was held in July, and was attended by a few of the leading purveyors of milk. The object was to secure by arrangement a better system of distribution, but no practical result was effected, and the only resolutions carried were that no more skilled or experienced men should be taken from milk producers or distributors.

STATEMENT OF THE INSPECTOR OF NUISANCES.

Some difficulty has occurred in getting notices complied with, owing to shortage of labour. A few notices are still outstanding, and are not included in the Summary of Nuisances Abated.

The Statement is condensed as far as possible.

DRAINAGE WORK.

The work carried out under this heading is divided into two sections, viz :—

- (a) That in connection with new buildings.
- (b) That in connection with old property.

The drains were tested of four new houses :—

Victoria Road, Walderslade	1
Snolidge Bottom	1
Maidstone Road	1
Kingswood Avenue	1

New additions to old buildings :—

287 High Street	1
18 Military Road	1
Elm Cottage, New Road	1
Empire Picture Palace	1

—
8

CESSPOOL WORK.

There were 2,786 cesspool applications during the year, necessitating the removal of 5,662 loads of liquid sewage and 2,642 loads of night soil. Although the present haulage contract is the highest on record, there has been a considerable saving in this branch of the work. I have found it necessary to make some changes, and I am pleased to report it has had the desired effect.

The following are the cesspool applications each month during the year :—

January	204
February	201
March	279
April	327
May	325
June	254
July	248
August	281
September	174
October	196
November	161
December	136
Choked drains cleared	309

REGISTERED COMMON LODGING HOUSE.

Number on Register	16
Number added to Register during year	1
Number temporarily closed	2
Number of Notices served	8
,, ,, to cleanse	5
,, ,, to repair	3
,, ,, for overcrowding ..	0

HOUSES LET IN LODGINGS.

Number on Register	36
Number added to Register	1
Notices to cleanse	1
,, to repair	1
,, to abate overcrowding	1

OFFENSIVE TRADES.

(1) Gut Scrapers	1
(2) Fried Fish Businesses	12
Temporarily closed	15
(3) Marine Store Dealers	4
Notices to cleanse	2

SLAUGHTER HOUSES.

Number on Register	13
Removed from Register	1
Notices served to cleanse	11
,, for repairs	1

UNSOUND FOOD VOLUNTARILY SURRENDERED.

Beef, Carcasses	15
,, Quarters	7
,, lbs.	112
Pig Carcasses	4
Edible Organs	49
Rabbits, Foreign Carcasses	3
Pork Pies	6
Cheese, lbs.	12
Fish, Codlings, Boxes	20
Fruit, Double Crates of Bananas.....	23

INFECTIOUS DISEASES.

Cases removed to Hospital :

(a) Diphtheria	21
(b) Scarlet Fever	43
(c) Enteric Fever	2
(d) Cerebro Spinal Fever	12
Number of loads of bedding disinfected	131
Number of Library Books disinfected	26
Work prohibited in the homes of Outworkers..	14

MORTUARY.

Bodies removed to Mortuary :—

(a) Men	7
(b) Women	3
(c) Children	4
Post-Mortem Examinations	7
Buried at the expenc of parish.....	2

COWSHEDS.

In use	16
Not in use	3
Dairies :—	
Milkshops on Register	33
Temporarily closed, owing to the short- age of milk supply	20
Number of Registered Cow-keepers	8
Number of Statutory Notices served	2

CONTAGIOUS DISEASES (ANIMALS) ACT.

During 1917 three cases of suspected Swine Fever were reported and were confirmed by the Board.

Notices Served :—

Form A., Articles 2 and 19.....	3
Article 8 (5), Notice to cleanse and dis- infect or burn and destroy	3

BAKEHOUSES.

Number of Bakchouses :—

Workshop Bakchouses on Register.....	23
In use	11
Underground.....	4
Factory Bakchouses	5
Notices served to cleanse	3

VISITS.

Homes of Outworkers	530
Common Lodging Houses	69
Slaughter Houses	676
Infectious Diseases.....	446
Drainage Work	357
Housing and Town Planning	76
Cesspool Work	71
Complaints and General Nuisances	93
Houses Let in Lodgings	63
Factory and Workshops Act	240

STATUTORY AND OTHER NOTICES SERVED.

Notices served	225
Letters written	305

SUMMARY OF NUISANCES ABATED.

Accumulations of manure removed.....	19
Bell Traps removed -.....	18
Broken w.c. pans removed	16
Brick drains removed	2
Concrete yards repaired	10
,,," provided	33
Cesspools ventilated.....	19
Air-tight covers to cesspools provided	6
Cesspools deepened	40
Cesspools constructed	19
Closet structures built or rebuilt	41
Drains repaired.....	16
Drains to new buildings tested	4
Drains to old buildings inspected and re- inspected	357
Flushing cisterns provided	17
,,," repaired	6
Old drains replaced with new	50
Houses with privies supplied with drainage ...	30
New sink waste drains	12
Overcrowding abated	2
Keeping animals in unfit state.....	2
Privies repaired	24
Privies filled in	30
Pan and trapped closets provided	30
Sinks provided	13

Undrained stables drained	1
Choked drains cleared	309
Wash-houses provided.....	3
Ventilation provided under floor	2
Manure pits provided	2
Roofs and gutterings repaired	42
Roofs and gutterings repaired	42
Interior of houses cleansed and repaired	37
D. trap and container replaced with wash-down pan	1

3. HOUSING & INSANITARY PROPERTY.

This very important subject has only received limited attention during the year, and such work as has been carried out has been of an urgent and necessary character. The existing difficulties in the way of labour, cost of materials, and shortage of houses are well known, and might be considered sufficient to warrant an entire discontinuance of the work ; but regard to the health of people who are dwelling under insanitary conditions is paramount, and there are certain houses which must be dealt with. Unfortunately, those in which improvement has taken place form only a small proportion of those which require it, but they represent the most urgent cases. The question of insanitary property, and of housing generally, will require not only careful consideration, but prompt and vigorous action, and I would suggest that your Council takes early action in regard to its future housing policy. In my opinion the general direction of housing reform should include :—

- (a) Condemnation and demolition of all slum property.
- (b) The provision of dwellings suitable to the needs of the poorer classes, varying in size, and adapted for large as well as small households.
- (c) The equipment of all dwellings with the necessary conveniences of water supply, food storage, etc.
- (d) Compulsory powers for dealing with neglectful occupiers.
- (e) Powers to enable Local Authorities to acquire vacant land in and around their districts, on cheap and easy terms, and to erect thereon self-contained cottages, the number of which per acre should be strictly limited.

In July a circular letter and form was addressed to all Local Authorities by the Local Government Board, with respect to the provision of working class houses after the War. The information required was in regard to present housing accommodation, to additional housing required, to any housing schemes in contem-

plation, to sites, means of access, action by private enterprise or public utility societies.

The answers to the various questions were drafted and approved by the Council.

The present method of dealing with insanitary property is either under Sections 15 or 17 of the Housing and Town Planning Act, 1909, or in cases where the defects are slight, and the interiors dirty, Notices are served under the provisions of the Public Health Acts, 1875, 1890 and 1907.

In a few cases owners have undertaken the necessary repairs without receiving Notices.

The following Tables are in accordance with Article V. of the Housing (Inspection of the District) Regulations.

Total number of houses inspected	170
Number of dwelling houses inspected under Section 17 (1909)	7
Number of representations made with a view to obtaining Closing Orders	7
Number of Closing Orders made	7
Number of houses made fit after the ser- vice of Closing Orders	Nil
Number of houses in which defects were remedied without the service of Closing Orders	9
Number of houses demolished.....	10
Of these, 6 were outstanding from 1916	
3 were voluntarily demolished, and	
1 was reported in 1917.	
Number of owners cited to appear	Nil

General character of defects :-

1. Back to back, or devoid of through ventilation.
2. No sinks or water inside the houses.
3. Dirt, damp, and delapidations.
4. Unpaved yards.
5. Insufficient w.c. accommodation.

The following houses were reported under this Section :—

98 Ordnance Street	To be demolished
50 Priest Dale	Demolished
5 Lines Road	Awaiting action.
6 "	"
7 "	"
8 "	"
14 Slicketts Hill	"

SECTION 15, HOUSING ETC., ACT.

Number of houses reported	29
Notices and specifications issued	26
Awaiting confirmation by Council.....	3
Number of houses remedied by owners without Statutory Notices.....	Nil

STATEMENT SHOWING NUMBER OF HOUSES INSPECTED AND DEALT WITH DURING 1917.

Number of houses inspected.....	170
Number reported under Section 17.....	7
" " " " " 15.....	29
Number put into a fit state, Section 15	18
Number outstanding, 15	10
Voluntarily demolished	1
Number dealt with under the provisions of the Public Health Acts, 1875, 1890, 1907 ...	144

Owing to difficulties previously mentioned, there are houses reported months ago in which the work is not yet completed. Some have not been begun, others are partly done, and others are done in an unsatisfactory manner. The issue of Closing Orders will be necessary in some cases.

NEW BUILDINGS.

Plans for 10 new buildings were approved, and for 7 alterations to existing buildings.

No dwelling houses were erected.

OVERCROWDING.

Notices to abate were served in two instances. This question is much complicated by the shortage of dwelling houses. This leads to the joint occupation of a house by two families. Added to this is the billeting of soldiers during the winter months.

The usual standard of overcrowding is two persons per room.

A return which I obtained during the autumn showed over 100 houses with eight or more persons in each (adults and children).

4.—INFECTIOUS DISEASES.

The fear that the circumstances of a great war, waged in many countries and climes, and involving at home and abroad vast disturbances and aggregations of population would cause a great

increase in this class of diseases, has fortunately not been realised, and during 1917, as in 1916, there has been a diminished prevalence. The one exception is Measles, which has prevailed with varying intensity during the whole year.

The following cases came to reside in the District either as contacts or convalescents, but no further extensions of disease occurred.

Enteric Fever	1
Dysentery	4
Cerebro-Spinal Fever	1

SMALL POX AND VACCINATION.

No case of Small Pox has occurred. The Vaccination returns for the Rochester and Chatham Registration District are as follows :—

Number of Births registered	1284
Vaccinated	807
Declarations of Objection	415
Percentage Vaccinated	62.8

In order to ensure prompt vaccination and re-vaccination in the event of an outbreak of Small Pox, the Local Government Board issued an Order in February, empowering Medical Officers of Health to vaccinate and re-vaccinate contacts free of charge. alth to vaccinate and re-vaccinate contacts free of charge. This Order is known as the Public Health (Small Pox Prevention) Regulations, 1917.

SCARLET FEVER.

Cases notified	52
Deaths	Nil
Households affected	46
Removed to hospital	43
Percentage removed	83

The numbers notified during 1915 and 1916 were 126 and 88.

Local incidence :

St. Mary's Ward	8
Luton , ,	28
St. John's , ,	16

DIPHTHERIA.

Cases notified	34
Deaths	2
Case mortality	6 per cent.

Households affected	30
Removed to hospital	21
Percentage removed	62

The numbers notified in 1915 and 1916 were 98 and 76.
Local incidence :

St. Mary's Ward	4
Luton	14
St. John's	16

These two diseases are often associated in epidemic prevalence although differing in type, and the numbers occurring during 1917 are the smallest for many years.

Respecting Diphtheria, I would draw attention to the fact that Antitoxin—which is supplied free to medical practitioners—was only used in fifteen cases, or rather less than half. The value of this remedy is undoubted, and even if the case is to be removed to hospital for further treatment, if Antitoxin is administered before removal, the prospect of recovery is materially improved. To give it by the mouth is useless, it should always be injected under the skin.

ENTERIC OR TYPHOID FEVER.

Four cases were reported, but one proved to be a case of Pneumonia, and one a case of Cerebro-Spinal Fever, so that two represents the nett number. There were no deaths.

ERYSIPILAS.

Of this disease six cases were notified.

MEASLES AND GERMAN MEASLES.

These diseases have been compulsorily notifiable since the 1st January, 1916. The duty of notification rests upon the parent or guardian and applies to each case or suspected case. It is also the duty of a medical practitioner to notify the first case seen by him in any household, unless previously notified by the parent, and if no case has occurred in the household within two months.

Measles became epidemic at the end of 1915, it has prevailed ever since, and reached its maximum intensity in January, 1916. There were large numbers of cases reported until the end of May, 1916, when there was a considerable decline, and during the last quarter of that year only two cases were reported.

A few cases were notified in January and February, 1917, and in March there was a sudden increase, continuing until May, when the numbers again declined until December, when a large number

of cases occurred, fewer in number than the previous winter elevation, and chiefly amongst children under 5 years of age.

The comparative incidence in 1916 and 1917 is as follows :—

1916. Number of cases notified :

Measles	540
German Measles	65
	—
Total	605
Number of deaths	16
Case mortality	2.5 per cent.

1916—First Quarter	358
Second „	189
Third „	56
Fourth „	2

1917. Number of cases notified :

Measles.....	355
German Measles	79
	—
Total	434
Number of deaths	8
Case mortality	1.9 per cent.

First Quarter	51	41	92
Second „	108	37	145
Third „	28	0	28
Fourth „	168	1	169

Sources of information :—

Medical Practitioners	350	or	80 per cent.
Parents	56	or	13 „
School Teachers	28	or	7 „

The above figures represent primary cases only.

Two Health Visitors make the necessary investigations. Each case is visited, and the general objects of the inquiry are to see that preventive measures are observed, that proper care and attention is being given to the cases, especially in regard to rest, warmth and ventilation, and to the provision of medical attendance.

A system of weekly returns from the elementary schools is useful in bringing to light unnotified cases.

The rules as to exclusion from school were detailed in last year's Report.

It is gratifying to record such a low rate of mortality—nearly 3 per cent. in 1916, and nearly 2 per cent. in 1917.

I attribute this to increased care and attention in the nursing of the patients, although this is still far from satisfactory.

Compulsory notification, home visitation and inquiry, combined with advice given to parents, are making people realise that Measles if neglected is a serious and fatal disease, which in the past has caused a higher mortality amongst children than any other infectious disorder. Its most frequent complications are Bronchitis and Pneumonia, but their effect is greatly mitigated by early treatment, and above all by intelligent advice and management. Where these can be secured, recovery is the rule; when they are lacking, the fatality of Measles is very marked. In my opinion, it will be a good policy to arrange with the District Nursing Association for the services of nurses in such cases amongst children as the Medical Officer of Health considers desirable, viz., in Measles, Epidemic Diarrhoea and Ophthalmia Neonatorum.

Section 133, Public Health Act, 1875, gives power to Local Authorities to provide medical assistance, and Section 67, Public Health Amendment Act, 1907, gives power to provide nurses for patients suffering from infectious diseases, for whom hospital accommodation is not available. In the case of nursing of children under 5 years of age, the Local Government Board gives grants of one-half of the total expenditure incurred.

WHOOPING COUGH.

From this disease there were nine deaths. The fatal complications are the same as in Measles.

ZYMIC OR INFECTIVE ENTERITIS.

Commonly known as Diarrhoea, Enteritis or Gastritis.

Twenty-two deaths were registered, of which thirteen were of infants under 1 year of age.

Its incidence is greatest during the summer and autumn, when conditions exist which favour the development of putrefactive bacteria, and contamination of milk and other foods.

Its association with insanitary conditions is undoubted. The practice of personal and domestic cleanliness, and a high standard of municipal cleansing will go far to abate its prevalence. Its primary source is contaminated food.

OPHTHALMIA NEONATORUM.

This means inflammation of the eyes of the newly-born.

It is notifiable by medical men, and by midwives, if they have any reason to suspect it.

Twelve cases were reported, as against twenty-two in 1916.

Of these, four were notified by medical men, and eight by midwives. In all the latter cases medical advice was secured.

Each case is at once visited to see that proper attention is being given. The secret of success is the washing away of the discharge, and the regular and frequent application of suitable remedies. Arrangements have been made to secure hospital treatment whenever this is found to be desirable. It may be expected that with a more efficient and a higher standard of midwifery there will be a reduction in this disease, which when neglected or imperfectly treated is so liable to cause permanent blindness.

CEREBRO-SPINAL MENINGITIS.

Thirteen cases occurred, as against 12 in 1915, and 22 in 1916. Ten cases were treated at the Alexandra Hospital, Wigmore; one at the Royal Naval Hospital, and two at home—one of the latter dying within a few hours of the attack.

January	2
February	4
March	2
April	2
May	0
June	1
July	1
November	1
<hr/>	
Total	13

There were 11 deaths, 2 being of cases admitted in 1916.

Mortality, 70 per cent.

Ages :—Under 5 years.....	4
5 and under 15 years	6
15 ,, 25 ,, 	2
25 upwards	1

Sex : Males, 7 ; Females, 6.

One hundred and fifteen contacts were examined. Of these, 110 gave negative results, and 5 were positive. At the second or third examination after a week's interval these were found to be negative.

No secondary cases occurred in any of the households attacked.

The measures taken to control the spread of the disease have been detailed in previous reports. Briefly, they consist in removal or isolation of the patient, bacteriological examination of all contacts, and disinfection of articles used by or for the patient.

The rate of mortality in civil cases is a high one, and compares unfavourably with the mortality amongst naval and military cases. There are two reasons for this—one being that in a civil population all age groups and both sexes are liable, whereas in the services, it is only young adult males. Children form the majority of cases in civil life, and the mortality amongst children is always greater than amongst adults. The second reason is that service cases are earlier diagnosed, and come more promptly under treatment. In the civil population, and notoriously amongst the poor, the services of a medical man are seldom obtained at the onset of the disease, with the result that valuable time has elapsed before the patient is removed to hospital, and treated in the only sound way by lumbar puncture and the injection of serum.

The difficulties of carrying out this treatment in an ordinary dwelling are great, and at times impossible, and it is this difficulty which forms the chief reason for hospital treatment.

Cerebro-Spinal Meningitis, although an infectious disease is only markedly so under certain conditions. These are, insufficient cubic space, overcrowding, and defective ventilation. Any one of these favours its development and spread, and when measures are taken to remedy them its progress is arrested.

The maximum prevalence is in the first four months of the year, when the climatic conditions lead to shutting of doors and windows and to the aggregation of individuals in confined spaces, when catarrhs and respiratory affections are common, and when the still air becomes fouled with millions of micro-organisms. The great deterrent is undoubtedly free ventilation. Currents of fresh air are fatal to the micrococcus. Free ventilation will check any epidemic. It is the first and most important preventive measure, and unless it is provided, no other is of any avail.

In conjunction with the Military Authorities, steps were taken to secure adequate ventilation of public buildings, and arrangements were made with the managers of theatres, music halls, and picture palaces, for the opening of doors and windows between the performances for at least ten minutes, in order that the air of the interiors might be changed. Arrangements have also been made for the ventilation of tram cars in such a manner that the public cannot close the apertures.

The prompt bacteriological examination of all contacts has been carried out at Fort Pitt Military Hospital, and my thanks are due for the ever ready and courteous help which has been given. Without the aid of this laboratory, the difficulties would have been very great.

HOSPITAL PROVISION FOR INFECTIOUS DISEASES.

St. William's Hospital, used jointly by Rochester and Chatham, has one hundred beds. There is accommodation for Scarlet Fever, Diphtheria and Enteric Fever.

It is situated in Rochester.

The Small Pox Hospital is available for use if required.

The Alexandra Hospital at Wigmore is used jointly by Rochester, Chatham and Gillingham Authorities, for cases of Cerebro-Spinal Fever. It contains fourteen beds. The question of its permanent retention for this purpose should be considered. Seeing that no cases have occurred for five months, it is probable that more advantageous arrangements might be adopted. The one essential in treating Cerebro-Spinal Fever is free ventilation, and subject to this provision, I think cases might safely be treated at a general hospital.

BACTERIOLOGICAL WORK.

With the one exception of Cerebro-Spinal fluids, and swabs from the throats of contacts, all bacteriological work is carried out at the County Laboratory at Maidstone. The examinations are promptly carried out, and results forwarded without delay.

The following figures relate to specimens sent to the County Laboratory during 1916.

	Total No. forwarded	No. giving positive results	No. giving negative results
Diphtheria	50	29	21
Enteric Fever	10	1	9
Pulmonary Tuberculosis	65	20	45
Ringworm	45	27	18
Anthrax	6	—	6

POLIOMYELITIS—ordinarily known as Infantile Paralysis, has been notifiable since 1912.

No cases were reported during 1917.

MALARIA.

In August, 1917, a Memorandum was issued by the Local Government Board with reference to the occurrence of Indigenous Malaria in this country.

The return to England of men who have been serving in Malaria-infested localities, and who carry in their blood the parasite of Malaria, which is transmitted from person to person

by the bite of the female anopheline mosquito, indicates the probable occurrence of the disease amongst the civil population of areas where these mosquitos abound.

Within the area of the Thames and Medway Estuary there are many marshy districts, and although no cases have occurred in the Borough, there have been cases in the vicinity, and in the words of the Memorandum, "It is very desirable that medical practitioners should keep the Medical Officer of Health of their districts informed of any cases of fever occurring in their practices shown, or suspected to be due to Malaria."

This, in order that inquiries may be made into possible source, of infection.

ANTHRAX.

Owing to the occurrence of two fatal cases of Anthrax in the Royal Naval Hospital, after the use of a cheap shaving brush, purchased at a shop in Chatham, the matter was referred to me by the Surgeon General for such action as I thought fit.

A similar brush purchased at the same shop for experimental purposes was found to contain a bacillus similar to the Anthrax bacillus. I at once visited the shop where the brushes were purchased, and sent six of them to the County Council Laboratory for examination, and also gave the proprietor formal notice to discontinue the sale until permission was given.

The report from Dr. Greenwood was as follows :—

"An organism suspicious of *Bacillus Anthracis* was cultivated from two of the brushes. Inoculation tests were carried out, but the animals remained healthy. We must therefore consider the six brushes negative."

A copy of this was sent to Surgeon General Hoskyn on July 30th, and on August 8th I received a telegram from the Local Government Board, asking for specimens of the brushes to be sent to the Board for examination. The whole of the stock of brushes (135) was handed to me by the proprietor, and nine of these were sent to the Local Government Board, the rest remaining in my custody. The names of the wholesale firms who had supplied the brushes were also forwarded. The preliminary report on the examination of the brushes was as follows :—

"An emulsion from two of the brushes with brown handles has been found by animal inoculation and culture to contain Anthrax Spores. The examination of the other brushes is not yet completed."

The brushes seized were of two kinds, one with brown wooden handles, the other with bone handles; and although it was interesting to find Anthrax Spores in the brown handled brushes, it was stated that the patient had purchased a brush with a bone handle.

All these brushes had been mixed together, and some were of old consignments. One point of interest emerged, viz., that one of the wholesale dealers concerned had supplied brushes which had caused infection in other places, and that he obtained his brushes from a manufacturer whose goods had been responsible for more shaving brush Anthrax than those of any other manufacturer.

The final conclusion was that there was presumptive evidence that certain of the brushes had been contaminated with Anthrax Spores, and that probably the implicated brushes were part of a 1915 consignment, which had been unsold and mixed with later ones.

The result of examination of a second batch of brushes was negative.

In the end, all the brown handled brushes were destroyed, and the remainder were returned to the retailer, leaving the responsibility of selling them to him.

VENEREAL DISEASES.

The administrative measures are under the control of the County Council, and a Treatment Centre is in operation at St. Bartholomew's Hospital.

There are three weekly clinics :

For Men, Tuesdays and Thursdays, 5.30 to 7.30 p.m.

For Women, Thursdays, 3 to 5 p.m.

Treatment is free. No recommendations are required, nor need anyone who attends be afraid that his or her illness will become known to any other person. On entering the Clinic they are given a number and henceforth are known and prescribed for by that number only.

The date of opening was July 4th, 1917, and for the following information I am indebted to the Medical Officer in charge.

First Quarter (July to September).—New cases, 51.

Males, 36 ; Females, 21. Total attendances, 238.

Second Quarter (October to December).—New cases, 38.

Males, 22 ; Females, 26. Total attendances, 332.

The arrangements at the Clinic are very complete. Diagnoses

are confirmed by bacteriological examination, and the treatment is of the latest and most scientific character. It needs regular attention on the part of the patient, but if this condition is complied with, there is a reasonable probability of complete cure, as against a mere relief of symptoms attained under former methods.

The advantages of this free treatment cannot be too widely known, and it should be constantly advertised, and kept before the public.

PROPAGANDA WORK.

Under the auspices and help of the National Society for Combating Venereal Diseases, work of this character has been carried out in Chatham during the past year.

The first step was the formation of a Local Propaganda Committee, composed of representatives from the Corporations of Rochester, Chatham and Gillingham, and of the Medway Board of Guardians, together with local Medical Officers of Health. The Medical Officer of Health for Chatham undertook the duties of Hon. Secretary.

Literature and lecturers were supplied by the National Council, printing, postages, and hire of rooms were local expenses.

The next step was to convene a Conference of citizens representing various interests—Industrial, Municipal, Social, Religious, etc. This was held on June 6th, under the presidency of the Mayor of Chatham, and was addressed by the joint secretaries of the National Council, Mr. Gotto and Mr. A. B. Turner.

The question of propaganda is a very wide one, and it is of the greatest importance. Individuals can be influenced both privately and publicly, and on this subject there is a formidable barrier of ignorance and prejudice to be broken down.

It was decided at the Conference to hold two courses of lectures, for men only and for women only.

In spite of wide-spread invitations, the issue of hundreds of tickets, and numerous promises, the attendances, although good at the men's lectures, were not equal to expectation, and at the women's were disappointing.

The education of the public respecting the very wide spread ravages of Venereal Disease, its occurrence amongst the innocent, and its responsibility for much permanent disease and disablement, is absolutely vital to the success of preventive measures, and propaganda work, which later on may arouse more general interest than it does at present, must be continued.

5. TUBERCULOSIS.

PULMONARY.

Forty-three deaths occurred in the Borough, and 7 deaths in Institutions outside.

Total, 80.

PRIMARY NOTIFICATIONS.

Private Practitioners	37
Hospital cases	None
Tuberculosis Dispensary	14
School Medical Officer	30
	—
Total	81

DISTRIBUTION.

St. Mary's Ward	32
Luton ,, 	24
St. John's ,, 	25

Ages.

Under 1 year.....	1
1 and under 5 years	2
5 ,, 15 ,, 	34
15 ,, 25 ,, 	16
25 ,, 45 ,, 	19
45 ,, 65 ,, 	9

Sex.—Males, 42 ; Females, 39.

VISITS.

Primary Visits	111
Subsequent visits	24
Houses disinfected	34
,, cleansed	1

NON-PULMONARY.

From Tuberculous Meningitis	5 deaths
,, other Tuberculous diseases	3 ,,

NOTIFICATIONS.

Private Practitioners	12
Hospital cases	4
Tuberculous Dispensary	9

School Medical Officer	5
Total	30

DISTRIBUTION.

St. Mary's Ward	7
Luton ,,"	15
St. John's ,,"	8
Ages.	
Under 1 year.....	1
1 to 5 years	8
5 ,," 15 ,,"	16
15 ,," 25 ,,"	2
25 ,," 45 ,,"	3

Sex.—Males, 13 ; Females, 17.

CLASSIFICATION.

Glandular	17
Joints	2
Meninges	3
Other parts	8

Forty children attending Public Elementary Schools were referred to the Tuberculosis Dispensary for observation and treatment.

TUBERCULOSIS DISPENSARIES.

There are two in the District, one in Rochester, and one in Gillingham. They are attended by patients from each constituent part of the area, and the Tuberculosis Officer has kindly supplied me with the following particulars of Chatham cases.

Number of new patients during the year, 184. These were diagnosed as follows :

Pulmonary Tuberculosis	Surgical Tuberculosis	Other diseases	Apparentiy healthy	Observation	Bronchitis
79	53	4	9	33	6

A Tuberculosis Dispensary forms an important link in the chain of Tuberculosis control, but its efforts are confined to the relief of symptoms, to the personal benefit of the affected individual and his restoration to working capacity, but the essence of success depends on the degree in which the infection of other individuals is avoided, and it must be confessed that dispensary, domiciliary, sanatorium treatment and ancillary nourishment, although helpful

will never by themselves make any material impression on the spread of Tuberculosis.

Under present conditions, little real progress is being made in the prevention of Tuberculosis. The Housing question is in abeyance, and the provision for Institutional treatment cannot be increased. Dispensary treatment, home visitation, the search for contacts, and the provision of extra nourishment and Cod Liver Oil—both of which are of limited supply—all help the patients and increase their comfort, but treatment, however perfect, will never eradicate Tuberculosis. To recount preventive measures in detail is unnecessary, but there is one which the public can practice, but do not. I allude to fresh air and ventilation, which combined with sunlight are the greatest known enemies of the disease. Open doors and windows are rarely seen ; the result is that the dwellers in these houses create an atmosphere favourable to the development and spread of the germs of disease.

The Tuberculosis (Domiciliary Treatment) Order came into force on January 1st, 1917.

Article 11 (6) makes it incumbent on medical practitioners to inform the Medical Officer of Health of any circumstances known to them which may affect adversely the sanitary conditions under which the patient is living, and in respect of which action by the Medical Officer of Health would be necessary or desirable. No communication of this character has been received.

6.—MATERNAL AND CHILD WELFARE.

MIDWIVES.

The supervision of Midwives under the Act of 1902 is carried out by Inspectors appointed by the County Council.

The position of the Midwife in connection with the well being of mother and infant is of the highest importance, and above all it is necessary that there should be an adequate number of trained midwives in every district. The calling is an arduous one, and the income uncertain, being dependent on the number of cases attended and the fees secured.

As the result of a conference I held with the local Midwives in January, 1917, an agreement was come to that the lowest fee for attendance and nursing should be 15s. At the same time an endeavour was made to secure the co-operation of the Midwives with regard to the attendance of expectant mothers at the proposed Maternity Centre, and the suggestion was made to them to

form a guarantee fund for the part payment of doctors' fees, when sent for in emergencies, but no subsequent action resulted.

No case of Puerperal Fever has been notified.

The deaths from accidents and diseases of pregnancy and parturition were 5 in number.

NOTIFICATION OF BIRTHS ACT, 1907.

Two Health Visitors are employed, one giving her whole time, the other three-fourths, the remaining fourth being given to work in connection with the School Medical Service.

The Borough is divided into two Districts, one being allotted to each Health Visitor.

Visiting is carried out to the age of twelve months, eight separate visits being paid, or more frequently in certain cases.

Ante-Natal Visiting is also included, and arrangements are now in force for the occasional visitation of delicate and ailing children after the age of one year.

The Health Visitors have definite instructions regarding the details of their work, and a systematic record of each case is kept. They report each month, and are under my direct supervision. The work is most valuable, and its benefit to mothers and children is undoubtedly.

The total number of Births registered as occurring in the Borough during 1917 was 911, of which 852, or 94 per cent. were notified.

The list of notified births is shown weekly to the Registrar of Births and Deaths, and he supplies particulars of such births as have been registered but not notified.

About two-thirds of confinements are attended by Midwives.

Of Births notified, 77 per cent. were by Midwives ; 23 per cent. by Doctors.

Table showing results of work under Act during 1916.

Total notified, 858. Midwives, 662 ; Doctors, 196.

Number of Mothers visited.....	792
Total Visits paid	5237
Number of breast-fed infants ..	688
,, bottle-fed ,, ..	92
Defective Addresses	19
Changed ,,	32
Removed	77
Refused admission	4
Number of houses clean	429

Number of houses fairly clean	216
" " not clean....	68
Improved during visits	74
Number of infants still born	26
Doctors' cases not visited	66
Deaths during visits	56

Of these deaths,

17 occurred during the 1st week	
12 ,, between the 2nd and 4th weeks	
9 ,, " 4th ,, 8th ,,	
18 ,, " 2nd ,, 12th months	
Mothers employed	100
Outworkers	22
Hawkers	19
Munitions	10
Factories	14
Charwomen	9
Shops	10
Laundry	3
Tramways	4
Domestics, etc.	9

The following comments are based on information collected by the Health Visitors.

METHODS OF FEEDING.

There has been some increase in bottle feeding. The disturbing conditions of life have made several mothers incapable of breast feeding. This has been particularly noticeable after air raids. Few mothers would knowingly feed their infants with unsuitable food, and the advice to avoid starchy foods, and most condensed milks for young infants, is readily followed.

There is much evidence that the Maternity Centre is greatly appreciated for the advice freely given, and for the opportunity of securing at a reasonable price food in every respect suitable for infants.

One difficulty in the work has been the frequent moving and changing of addresses. Many of the cases remain only a short period, having homes elsewhere, their husbands being in the Army or Navy. In these cases visiting has had to cease.

Many of the insanitary conditions discovered at the homes have been remedied, but several unsatisfactory housing defects could not be dealt with.

MATERNITY CENTRE.

The question of establishing a Centre for the furtherance of Maternal and Child Welfare work first came under consideration at the end of 1916. A Sub-Committee was formed, and I was directed to formulate a scheme.

In doing this, I pointed out the necessity for making this work a part of the Public Health Service of the town, and not a separate district organisation, that it should take cognisance of mothers before, during, and after confinement; of infants up to 1 year of age, and in certain cases of children from 1 year up to the period at which they enter school.

Its scope would include methods of investigation, of advice and treatment, of education, and supervision of the food supply of infants.

The scheme as finally approved by the Council is on the following lines :—

1. The extension of Health Visiting, now carried on up to the age of twelve months, up to school age in selected cases.
2. The establishment of a Maternity and Infant Welfare Centre, whose functions would be chiefly advisory for
 - (a) Expectant mothers.
 - (b) Mothers and infants.
 - (c) Children from 1 to 5 years.
3. Arrangements with St. Bartholomew's Hospital for the treatment of
 - (a) Complicated cases of labour with pelvic deformity, needing surgical relief.
 - (b) Complications after parturition needing surgical treatment.
 - (c) Complications (Ante-Natal) dependent on organic diseases, such as Heart Disease or Albuminuria.
 - (d) Ophthalmia Neonatorum, and chronic diseases of the eye, ear, throat and nose.
4. Arrangements for the payment of the whole or a portion of the medical practitioner's fee, when called in for emergency assistance by a qualified Midwife, unless the fee is recoverable from the parents or the Guardians of the Poor.
5. The supply to persons attending the Centre of dried or sterilised milk, cod liver oil or malt extracts, where necessary, at a reduced or cost price.

One of the conditions attached to this privilege is the regular attendance of the mother and child at the Centre.

There are many conditions before and after birth which need expert advice.

Mothers who attend with their children receive directions respecting the hygienic management of themselves and their infants ; they get advice in cases of doubt or difficulty, and are referred to proper agencies for treatment when this is advisable or necessary.

As a general rule no actual treatment should be given at a Centre. It is not in any sense a free dispensary for the treatment of sick and ailing children ; its main object being the securing of medical supervision and advice for infants, especially in regard to the question of nutrition and general hygiene.

The general principles of organisation fall into three groups :—

- (a) Sanitary and supervisory work.
- (b) Consultation and direction of treatment.
- (c) Material aid in necessitous cases, provision of suitable garments, etc.

This last group is more within the province of the voluntary helper than the others are.

The work of Health Visiting and of a Maternity Centre represents only one section of the various activities necessary for raising the standard of health amongst mothers and infants, and for diminishing excessive mortality.

For the unsatisfactory conditions which exist, there is no single outstanding cause, but there are a number of causes which act in varying degrees of combination. There are insanitary surroundings, which it is the duty of sanitary authorities to remedy, and there is a low standard of living, an absence of domestic care and pride, thriftlessness, poverty, intemperance, and inattention to personal hygiene, all of which prejudice health and promote sickness.

These are only a few of the causal conditions, but they need emphasis. The complexity and inter-relation of the factors underlying infant mortality is such that an early or sudden reduction must be looked for. The best results will be attained by a study of and an improvement in the welfare, the surroundings, and the habits of the people, and in this connection a Maternity and Child Welfare Centre should prove a useful auxiliary.

THE CENTRE.

The arrangements outlined above were adopted and confirmed at the meeting of the Council held on February 14, 1917.

PREMISES.

Two rooms on the ground floor of the Public Library were found to be suitable and convenient for the purpose; they are airy and spacious, centrally situated, and have the advantage of a separate entrance, no stairs, sufficient lavatory accommodation and sanitary conveniences. There is also space in the yard for perambulators. These rooms have been altered and furnished, and are admirably adapted for the purpose.

The Centre was opened on April 24th. The days of attendance are Tuesdays and Fridays, from 2.30 to 4.30 p.m.

Notices of opening were issued to the public, letters were addressed to Medical Practitioners and Midwives, setting forth the objects of the Centre, and asking for their co-operation, and the Health Visitors were instructed to urge the attendance of mothers with their infants. On the first day of opening, nine mothers with their babies presented themselves.

REGISTER.

All names, addresses and dates of attendance are entered.

RECORDS.

The card system is in use. Each card contains space for particulars of mother, child and home conditions. Notes are made at each visit, and the infant's weight is also recorded on a separate card, which is kept by the mother.

STAFF.

Consists of Medical Officer to the Centre, and two Nurses, one in attendance each session.

THE WORK OF THE CENTRE.

From April 24th to December 31st, the Centre has been open sixty-two afternoons.

The number of new cases attending has been 240, equal to 26 per cent. of the total births registered during the year, and to 10 per cent. of births registered since the date of opening.

The total number of attendances during the same period is 795.

One hundred and seventy-six children were under the age of twelve months, and sixty-four between the ages of 1 and 5 years.

The number of expectant mothers who came for advice was five.

AILMENTS AND DEFECTS.

- Digestive troubles.
- Constipation or Diarrhoea.
- Inflamed buttocks.
- Stomatitis or Thrush.
- Rickets.
- Hernia—Umbilical and inguinal.
- Tuberculosis.

Ten cases requiring treatment have been sent to hospital, and several others have been referred to private practitioners.

Dummy teats are in common use, and it is difficult to induce mothers to discontinue them.

The advice given at the Centre is greatly appreciated, and has led to marked improvement in the condition of the infants.

It is especially in the direction of promoting cleanliness, of proper clothing, of regularity in feeding, of the avoidance of articles of diet unsuitable for children, of the benefits of fresh air, and of regular hours for sleep, that the influence of the Centre is making itself felt, by dispelling the prevailing ignorance on these matters.

Arrangements are made for recording the social and hygienic condition of homes, with a view of securing improvement when required.

The following figures relative to methods of feeding are of interest :—

	Breast fed	Breast and Bottle	Bottle	Totals
Under 3 months	48	19	27	94
3 to 6 months	9	7	15	39
6 to 9 months	17	2	4	15
9 to 12 months	11	3	11	28
	—	—	—	—
Totals	85	31	60	176
Percentage of each group :—				
Under 3 months	50	30	20	
3 to 6 months	43	18	39	
6 to 9 months	60	13	27	
9 to 12 months	43	7	50	
Percentage of total :—				
	48	18	34	

FAULTS IN FEEDING.

- Too frequent feeding.
- Irregularity.
- Tendency to change foods.
- Unsuitable foods.

KINDS OF ARTIFICIAL-FOODS IN COMMON USES.

- Glaxo, and other dried milks.
- Nestlés and other condensed milks.
- Cows' milk.
- Biscuits and rusks.
- Proprietary foods.
- Tea, bread and butter.

The cardinal principles are example and precept at the Centre, with following up at the homes. It may be a long time before any permanent impression is made on the infantile death rate, but the general result will be a higher conception of the duties of motherhood, and an encouragement to strive after a better standard of family health.

With respect to Ante-Natal work, I am disappointed, and would once more urge upon the local Midwives that it is to their advantage to send their patients to the Centre. The full scope of the work cannot be attained until it is more developed on the Ante-Natal side. By this means it is possible to secure the best available conditions for conserving the health of mother and infant.

SUPPLY OF DRIED MILK.

In cases where breast feeding is impossible, the use of dried milk has many advantages. It is easily stored, it is not so liable to contamination in the home as cows' milk, or condensed milk, it is easily prepared, is not wasteful, and in the majority of cases is liked and digested by infants. Finally, by its use, the municipality is able without any expense to supply at cost price an article which under present conditions of scarcity is a boon of the highest importance.

The only brand stocked is "Glaxo," but coupons for "Cow and Gate" brand are supplied, enabling mothers to purchase from accredited retailers at a reduced rate. Nearly 1,500 lbs. of Glaxo have been sold, and in addition a large number of coupons have been signed.

My experience of the use of dried milk as a food for infants convinces me that when it is used with care and intelligence, and a due regard to cleanliness, its use is attended with excellent results.

In any future extension of Maternal and Child Welfare work, the provision of a Maternity Home should claim a foremost place. Few people realise the difficulties which beset many working-

class households during the lying in period of the mother. The lack of adequate preparation and the unsatisfactory surroundings into which many an infant is ushered, and amongst which the mother has to struggle towards recovery, are only too common. In some cases, no matter how squalid the house, nothing will induce the mother to leave it for her confinement, but there are many others who would appreciate the quiet and well-ordered routine of a Maternity Home conducted on simple lines. Fees would, of course, be charged, and there should be no underselling of local Midwives.

A Home of this character might form the nucleus of a training school for Midwives, and have other activities.

In a district of this character, where there are three contiguous authorities, co-operation in this matter seems desirable.

7. - FACTORY & WORKSHOPS ACT, 1901. REGISTERED WORKSHOPS AND WORKPLACES.

On Register at end of 1917 :—

Tenement Workshops	0
Workshop Bakchouses	11
Domestic Workshops	21
Laundry Workshops	2
Other Workshops	102

Many bakehouses formerly included are now disused.

Visits paid to Workshops..... 240

One Notice of insanitary conditions was received from H.M. Inspector.

OUTWORKERS.

Chiefly tailoring and shirt making.

Seventeen lists were received from employers.

The total number thus employed is 1,445.

The number of visits paid to homes of outworkers was 530.

Fourteen cases of infectious disease occurred, and work was prohibited.

FACTORIES.

The number of factories where mechanical power is in use is 22.

BAKEHOUSES — Sections 97 to 102.

The number of Bakchouses on the Register is 23, but only 11 Workshop Bakchouses are in use. Four are underground bake-houses, and in addition there are five factory bakehouses.

Notices to cleanse and limewash were issued in three instances.

RAINFALL DURING 1917.

Taken at Luton Waterworks by Mr. Coles Finch.

January	1.24	inches.
February41	"
March	1.41	"
April	2.10	"
May	1.82	"
June	1.40	"
July	6.40	"
August	5.48	"
September63	"
October98	"
November	1.14	"
December	1.81	"
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Total	26.82	"

Forty-three per cent. of the total rainfall occurred in the months of July and August, and more than two-thirds during the second half of the year.

